

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000103142

Entity Name: TOWER ASSOCIATES, INC.

FILED
Apr 19, 2004
Secretary of State

Current Principal Place of Business:

3560 N.W. 115 AVENUE
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

PO BOX 331007
MIAMI, FL 33233

New Mailing Address:

FEI Number: 65-0800504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, ARCADIO
3650 NW 115 AVENUE
MIAMI, FL 33178

Name and Address of New Registered Agent:

TORRES, ARCADIO
P.O. BOX 331007
MIAMI, FL 33233

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ARCADIO TORRES

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TORRES, ARCADIO
Address: 13740 SW 105TH STREET
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: TORRE, JULIO C
Address: 517 FORREST DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TORRES, ARCADIO
Address: P.O. BOX 331007
City-St-Zip: MIAMI, FL 33233

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARCADIO TORRES

D

04/19/2004

Electronic Signature of Signing Officer or Director

Date